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PTO/SB/05 (4/98)
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	52647-1
	First Inventor or Application Identifier	Schaefer, Fritz
	Title	PROCESS FOR TREATING WASTE OIL
	Express Mail Label No.	EK470906804US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 20] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets]	ACCOMPANYING APPLICATION PARTS 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement of Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations] 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input checked="" type="checkbox"/> * Small Entity Statement(s) filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other:
4. Oath or Declaration [Total Pages 2] <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	
* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).	

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: /
Prior application information: Examiner Group / Art Unit:
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon if the information has not been inadvertently omitted from the submitted application parts.

17. Correspondence ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label 22504 (Insert Customer No. or Attach bar code label here)					
or <input type="checkbox"/> Correspondence address below					
Name	Davis Wright Tremaine LLP				
Address	2600 Century Square 1501 Fourth Avenue				
City	Seattle	State	WA	Zip Code	98101-1688
Country	US	Telephone	206-628-7711	Fax	206-628-7699

Name (Print/Type)	Jeffrey B. Oster	Registration No. (Attorney/Agent)	32,585
Signature	<i>Jeffrey B. Oster</i>	Date	22 September 2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)**442**

Complete if Known

Application Number **to be assigned**
Filing Date **September 22, 2000**
First Named Inventor **Schaefer, Fritz**
Examiner Name
Group / Art Unit
Attorney Docket No. **52647-1**

METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **04-0258**

Deposit Account Name **Davis Wright Tremaine LLP**

☒ Charge Any Additional Fee Required
Under 37 CFR §§ 1.16 and 1.17

2. ☒ Payment Enclosed:
☒ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	690	201	345			Utility filing fee	345
106	310	206	155			Design filing fee	
107	480	207	240			Plant filing fee	
108	690	208	345			Reissue filing fee	
114	150	214	75			Provisional filing fee	

SUBTOTAL (1) (\$)**345**

2. EXTRA CLAIM FEES

Total Claims **22** - 20** = **2** x **9** = **18**
Independent Claims **4** - 3** = **1** x **39** = **39**
Multiple Dependent
Fee from below
Fee Paid

**or number previously paid, if greater; For Reissues, see below

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9			Claims in excess of 20
102	78	202	39			Independent claims in excess of 3
104	260	204	130			Multiple dependent claim, if not paid
109	78	209	39			** Reissue independent claims over original patent
110	18	210	9			** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**57**

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65			Surcharge - late filing fee or oath	
127	50	227	25			Surcharge - late provisional filing fee or cover sheet	
139	130	139	130			Non-English specification	
147	2,520	147	2,520			For filing a request for reexamination	
112	920*	112	920*			Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*			Requesting publication of SIR after Examiner action	
115	110	215	55			Extension for reply within first month	
116	380	216	190			Extension for reply within second month	
117	870	217	435			Extension for reply within third month	
118	1,360	218	680			Extension for reply within fourth month	
128	1,850	228	925			Extension for reply within fifth month	
119	300	219	150			Notice of Appeal	
120	300	220	150			Filing a brief in support of an appeal	
121	260	221	130			Request for oral hearing	
138	1,510	138	1,510			Petition to institute a public use proceeding	
140	110	240	55			Petition to revive - unavoidable	
141	1,210	241	605			Petition to revive - unintentional	
142	1,210	242	605			Utility issue fee (or reissue)	
143	430	243	215			Design issue fee	
144	580	244	290			Plant issue fee	
122	130	122	130			Petitions to the Commissioner	
123	50	123	50			Petitions related to provisional applications	
126	240	126	240			Submission of Information Disclosure Stmt	
581	40	581	40			Recording each patent assignment per property (times number of properties)	40
146	690	246	345			Filing a submission after final rejection (37 CFR § 1.129(a))	
149	690	249	345			For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) _____

Other fee (specify) _____

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**40**

SUBMITTED BY

Name (Print/Type) **Jeffrey B. Oster**

Registration No. **32,585**
(Attorney/Agent)

Signature **Jeffrey B. Oster**

Complete (if applicable)

Telephone **206-628-7711**

Date **22 September 2000**

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Title: PROCESS FOR TREATING WASTE OIL

Attorney Docket No.: 52647-1

Applicant: Fritz Schaefer

Application Serial No.: to be assigned

Date of Deposit: September 22, 2000

EXPRESS MAIL LABEL NUMBER: EK470906804US

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date listed below, and is addressed to Assistant Commissioner for Patents, Washington, D.C. 20231.

Date:

Sept. 22, 2000

Signature

Kay Bulen

Printed Name

Kay Bulen